

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

West Virginia Republican Party, Inc.

ADDRESS (number and street)  
▼

5019 MacCorkle Avenue SW

☐Check if different  
than previously  
reported. (ACC)

South Charleston

WV

25309

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00417063

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2007

through

04

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Theresa Waxman

Signature of Treasurer

Electronically Filed by Theresa Waxman

Date

05

18

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
West Virginia Republican Party, Inc.

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		2461.53
(b) Cash on Hand at Beginning of Reporting Period .....	8738.08	
(c) Total Receipts (from Line 19) .....	26529.67	96028.33
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	35267.75	98489.86
7. Total Disbursements (from Line 31) .....	34139.71	97361.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1128.04	1128.04
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
0 4D D  
3 0Y Y Y Y  
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	13446.00	50114.57
(i) Itemized (use Schedule A) .....	12108.67	37844.78
(ii) Unitemized .....	25554.67	87959.35
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	0.00	0.00
(b) Political Party Committees .....	975.00	7485.00
(c) Other Political Committees (such as PACs) .....	26529.67	95444.35
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	583.98
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	26529.67	96028.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26529.67	96028.33

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		34139.71	97316.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡		34139.71	97316.82
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	45.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	45.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		34139.71	97361.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		34139.71	97361.82

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	26529.67	95444.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	45.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26529.67	95399.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	34139.71	97316.82
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	583.98
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	34139.71	96732.84

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 29

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Craig Blair Mailing Address 47 Wasser Drive City Martinsburg State WV Zip Code 25401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of WV Occupation Delegate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 485.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.8082 Amount of Each Receipt this Period 485.00
<b>B.</b> Full Name (Last, First, Middle Initial) Stuart Bloch Mailing Address 4000 Water St City Wheeling State WV Zip Code 26003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hazlett, Burt and Watson Occupation Financial Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 7 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.8009 Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) Philip E. Cline Mailing Address P.O. Box 119 City Huntington State WV Zip Code 25706 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Business Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 6 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.7889 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1235.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Joseph B Cook

Mailing Address 317 Southpointe Dr

City State Zip Code  
 Charleston WV 25314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.8186

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.** William T. Ellis

Mailing Address 4806 Kanawha Avenue, S.E.

City State Zip Code  
 Charleston WV 25304

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
self

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.7877

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** James H Harless

Mailing Address PO Box 1210

City State Zip Code  
 Gilbert WV 25621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
International Industries

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.7879

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

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PAGE 8 / 29

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Eleanor W. Herkness		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address P.O. Box 511		<b>Transaction ID:</b> SA11A1.7922
City <u>Lewisburg</u>	State WV	Zip Code 24901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer 	Occupation housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Oscar Nelson Jones		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address 2 Port Amherst Drive		<b>Transaction ID:</b> SA11A1.7997
City <u>Charleston</u>	State WV	Zip Code 25306
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Madison Coal and Supply	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Carl W. Liebig, M.D.		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 106 Doctors Drive		<b>Transaction ID:</b> SA11A1.8007
City <u>Bridgeport</u>	State WV	Zip Code 26330
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**TOTAL** This Period (last page this line number only) .....



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PAGE 9 / 29

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Doug McKinney  
Mailing Address 636 Rivendell Drive

City State Zip Code  
Bridgeport WV 26330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.8269

Amount of Each Receipt this Period

756.60

Travel Expense-mileage

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Doug McKinney  
Mailing Address 636 Rivendell Drive

City State Zip Code  
Bridgeport WV 26330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.8270

Amount of Each Receipt this Period

88.09

April postage

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Doug McKinney  
Mailing Address 636 Rivendell Drive

City State Zip Code  
Bridgeport WV 26330

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.8271

Amount of Each Receipt this Period

27.69

Meeting/Event Expense

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Carol D. Miller Mailing Address 1316 12th Street City State Zip Code Huntington WV 25701-4015 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of WV Occupation Delegate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 04 / 21 / 2007 <b>Transaction ID:</b> SA11A1.8071 Amount of Each Receipt this Period 150.00
<b>B.</b> Full Name (Last, First, Middle Initial) Rick Modesitt Mailing Address PO Box 2206 City State Zip Code Parkersburg WV 26102 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wood County Occupation Commissioner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt MM / DD / YYYY 04 / 04 / 2007 <b>Transaction ID:</b> SA11A1.7859 Amount of Each Receipt this Period 25.00
<b>C.</b> Full Name (Last, First, Middle Initial) Arch A. Moore Mailing Address P.O. Box 250 City State Zip Code Moundsville WV 26041 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 04 / 19 / 2007 <b>Transaction ID:</b> SA11A1.7999 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) .....

675.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Shelley R. Moore		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 9 / 2 0 0 7
Mailing Address P.O. Box 250		<b>Transaction ID:</b> SA11A1.8001
City Moundsville	State WV	Zip Code 26041
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Lawrence A. Pack		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 2146 Presidential Drive		<b>Transaction ID:</b> SA11A1.7962
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Pack, Hawley, Lambert & Burdet Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CPA Aggregate Year-to-Date ▼ 2500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Lee C. Paull, III		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address Rd 1 Box 306		<b>Transaction ID:</b> SA11A1.7963
City Wheeling	State WV	Zip Code 26003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Realtor Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

3250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Mary J. Payne Mailing Address 1414 Loudon Heights Road City Charleston State WV Zip Code 25314 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 04 / 19 / 2007 <b>Transaction ID:</b> SA11A1.8003 Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Melody L. Potter Mailing Address 105 Newcomer Road City South Charleston State WV Zip Code 25309 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 04 / 03 / 2007 <b>Transaction ID:</b> SA11A1.7827 Amount of Each Receipt this Period 150.00
<b>C.</b> Full Name (Last, First, Middle Initial) Patty Pringle Mailing Address RR 3 Box 1146 City Clarksburg State WV Zip Code 26301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer United Security Occupation Investment Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 04 / 04 / 2007 <b>Transaction ID:</b> SA11A1.7861 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Elaine Davidson Russell Mailing Address P.O. Box 146  City State Zip Code <u>Mill Creek</u> <u>WV</u> <u>26280</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt M M / D D / Y Y Y Y Y <u>0 4</u> / <u>0 4</u> / <u>2 0 0 7</u> <b>Transaction ID:</b> SA11A1.7862 Amount of Each Receipt this Period <u>250.00</u>
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <u>250.00</u>		
<b>B.</b> Full Name (Last, First, Middle Initial) John P. Russell Mailing Address P.O. Box 117  City State Zip Code <u>Mill Creek</u> <u>WV</u> <u>26280-0117</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt M M / D D / Y Y Y Y Y <u>0 4</u> / <u>0 4</u> / <u>2 0 0 7</u> <b>Transaction ID:</b> SA11A1.7864 Amount of Each Receipt this Period <u>250.00</u>
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <u>250.00</u>		
<b>C.</b> Full Name (Last, First, Middle Initial) Dr Diane E. Shafer Mailing Address Box 749  City State Zip Code <u>Williamson</u> <u>WV</u> <u>25561</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt M M / D D / Y Y Y Y Y <u>0 4</u> / <u>1 7</u> / <u>2 0 0 7</u> <b>Transaction ID:</b> SA11A1.7964 Amount of Each Receipt this Period <u>2500.00</u>
Name of Employer Occupation self Orthopedic Surgeon Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <u>2500.00</u>		

**SUBTOTAL** of Receipts This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Jo Slaughter

Mailing Address 1412 Robinhood Rd

City State Zip Code  
 Charleston WV 25314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.7932

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B.** William B Snyder

Mailing Address PO Box 829

City State Zip Code  
 Lewisburg WV 24901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RBS Inc

Occupation

Vice President Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.7976

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Lynn Staton

Mailing Address 368 Jaguar Drive

City State Zip Code  
 Inwood WV 25428

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.7829

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Larry D. Swann  
Mailing Address 405 Capitol St., Ste 513

City State Zip Code  
Charleston WV 25301-1730

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.7934

Amount of Each Receipt this Period

650.00

**B.** Full Name (Last, First, Middle Initial)  
L. Newton Thomas  
Mailing Address 914 Newton Rd.

City State Zip Code  
Charleston WV 25314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 7

Transaction ID: SA11A1.7906

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
Christopher Wakim  
Mailing Address 1 Hamilton Ave.

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.7911

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

1050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jeannette Wakim  
Mailing Address 1 Hamilton Avenue

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.29

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.8197

Amount of Each Receipt this Period

84.62

In-kind - Basket Contents  
for Fundraiser

**B.** Full Name (Last, First, Middle Initial)  
Jeannette Wakim  
Mailing Address 1 Hamilton Avenue

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.36

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 0 7

Transaction ID: SA11A1.8200

Amount of Each Receipt this Period

21.07

In-kind - Basket Contents  
for Fundraiser

**C.** Full Name (Last, First, Middle Initial)  
Jeannette Wakim  
Mailing Address 1 Hamilton Avenue

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.8210

Amount of Each Receipt this Period

63.59

Printing for Fundraiser

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

105.69

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 29

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jeannette Wakim  
Mailing Address 1 Hamilton Avenue

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.67

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.8208

Amount of Each Receipt this Period

30.31

In-kind - Decorations for  
Fundraiser

**B.** Full Name (Last, First, Middle Initial)  
Jeannette Wakim  
Mailing Address 1 Hamilton Avenue

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.8211

Amount of Each Receipt this Period

284.90

Center Pieces for Fundrai-  
ser

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

30.31

**TOTAL** This Period (last page this line number only) .....

13446.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Committee to Elect Vic Sprouse  
Mailing Address 1003 Cobb Street

City State Zip Code  
South Charleston WV 25309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 7

Transaction ID: SA11C.7968

Amount of Each Receipt this Period

100.00

**B.** Full Name (Last, First, Middle Initial)  
House of Delegates Bob Ashley  
Mailing Address P.O. Box 823

City State Zip Code  
Spencer WV 25276

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 3 / 2 0 0 7

Transaction ID: SA11C.7817

Amount of Each Receipt this Period

575.00

**C.** Full Name (Last, First, Middle Initial)  
Kim Wolfe for Congress  
Mailing Address PO Box 509

City State Zip Code  
Huntington WV 25710

FEC ID number of contributing  
federal political committee.

**C** C00418442

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11C.7941

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

825.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 29

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
Sypolt for Senate

Mailing Address PO Box 5

City State Zip Code  
Kingwood WV 26537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 7

Transaction ID: SA11C.8080

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

975.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

## **A. Abernathy Strategies**

Mailing Address 57 La Belle Street

City Dayton State OH Zip Code 45403

Purpose of Disbursement  
Consultant

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8248

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. Advantage Business Connection**

Mailing Address 4000 State Route 34, Suite A

City Hurricane State WV Zip Code 25526

Purpose of Disbursement  
Printing Expenses for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8254

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

371.00

Full Name (Last, First, Middle Initial)

## **C. American Electric Power**

Mailing Address PO Box 24413

City Canton State OH Zip Code 44701

Purpose of Disbursement  
HQ Electric Bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8264

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

107.48

**SUBTOTAL** of Disbursements This Page (optional) .....

2478.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Michael Ankrom

Mailing Address 231 Clemms Rd

City  
Huntington

State  
WV

Zip Code  
25705

Purpose of Disbursement  
Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8251

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Michael Ankrom

Mailing Address 231 Clemms Rd

City  
Huntington

State  
WV

Zip Code  
25705

Purpose of Disbursement  
Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8262

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Michael Ankrom

Mailing Address 231 Clemms Rd

City  
Huntington

State  
WV

Zip Code  
25705

Purpose of Disbursement  
Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8263

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Aristotle International

Mailing Address 205 Pennsylvania Ave

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

Bank Fee-Credit Card

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID:** SB21B.8266

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11.50

Full Name (Last, First, Middle Initial)

**B.** Charleston Marriott Town Center

Mailing Address 200 Lee Street

City  
Charleston

State  
WV

Zip Code  
25301

Purpose of Disbursement

Deposit for Fundraiser Dinner

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID:** SB21B.8227

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C.** Charleston Marriott Town Center

Mailing Address 200 Lee Street

City  
Charleston

State  
WV

Zip Code  
25301

Purpose of Disbursement

Balance for Fundraiser Dinner

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID:** SB21B.8245

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3206.28

**SUBTOTAL** of Disbursements This Page (optional) .....

7217.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Charleston Marriott Town Center

Mailing Address 200 Lee Street

City  
Charleston

State  
WV

Zip Code  
25301

Purpose of Disbursement  
Fundraiser Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8247

Date of Disbursement

04 / 17 / 2007

Amount of Each Disbursement this Period

322.24

Full Name (Last, First, Middle Initial)

**B.** Charleston Marriott Town Center

Mailing Address 200 Lee Street

City  
Charleston

State  
WV

Zip Code  
25301

Purpose of Disbursement  
Fundraiser Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8246

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

105.68

Full Name (Last, First, Middle Initial)

**C.** Dream Catcher

Mailing Address PO Box 5

City  
Charleston

State  
WV

Zip Code  
25321

Purpose of Disbursement  
HQ Web Host

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8250

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

339.95

**SUBTOTAL** of Disbursements This Page (optional) .....

767.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

## **A. Erie Insurance**

Mailing Address 100 Erie Insurance Place

City Erie State PA Zip Code 16530

Purpose of Disbursement  
2nd Quarter Payment- HQ Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8255

Date of Disbursement

04 / 24 / 2007

Amount of Each Disbursement this Period

425.00

Full Name (Last, First, Middle Initial)

## **B. Fibernet**

Mailing Address PO Box 2021

City Mechanicsburg State PA Zip Code 17055

Purpose of Disbursement  
HQ Phone Bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8226

Date of Disbursement

04 / 05 / 2007

Amount of Each Disbursement this Period

546.71

Full Name (Last, First, Middle Initial)

## **C. Todd Gunter**

Mailing Address RR 2, Box 306A

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Consultant

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8230

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

335.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1306.71

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Jeremy L. Maynard

Mailing Address 2801 Main Street, WW

City Ashland State KY Zip Code 41102

Purpose of Disbursement  
Website Work

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8218

Date of Disbursement

/   /

Amount of Each Disbursement this Period

525.00

Full Name (Last, First, Middle Initial)

**B.** Catherine McKinney

Mailing Address 636 Rivendell Dr

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement  
Supplies for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8252

Date of Disbursement

/   /

Amount of Each Disbursement this Period

615.00

Full Name (Last, First, Middle Initial)

**C.** Doug McKinney

Mailing Address 636 Rivendell Drive

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement  
Reimbursement for DVD Copies from 27-Pro

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8260

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1740.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

## **A. Mountaineer Gas**

Mailing Address PO Box 362

City  
Charleston

State  
WV

Zip Code  
25322

Purpose of Disbursement  
HQ Gas Bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B.8256**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.55

Full Name (Last, First, Middle Initial)

## **B. Pullman Plaza Hotel**

Mailing Address 1001 Third Avenue

City  
Huntington

State  
WV

Zip Code  
25701

Purpose of Disbursement  
Deposit for Meeting Reservation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B.8220**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

## **C. Marti Riggall**

Mailing Address 838 Carroll Road

City  
Charleston

State  
WV

Zip Code  
25314

Purpose of Disbursement  
Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B.8249**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2134.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Marti Riggall

Mailing Address 838 Carroll Road

City  
Charleston

State  
WV

Zip Code  
25314

Purpose of Disbursement  
Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8261

Date of Disbursement

/   /

Amount of Each Disbursement this Period

960.00

Full Name (Last, First, Middle Initial)

**B.** Shuman, McCuskey & Slicer, PLLC

Mailing Address 1411 Virginia Street East, Ste 200

City  
Charleston

State  
WV

Zip Code  
25301

Purpose of Disbursement  
Legal Retainer

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8216

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C.** Southwest Publishing & Mailing

Mailing Address 2600 NW Topeka Boulevard

City  
Topeka

State  
KS

Zip Code  
66617

Purpose of Disbursement  
Direct Mail Fundraising Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.8253

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7533.97

**SUBTOTAL** of Disbursements This Page (optional) .....

13493.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Suddenlink

Mailing Address P.O. Box 742529

City  
Cincinnati,

State  
OH

Zip Code  
45274

Purpose of Disbursement  
HQ Internet and Cable

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.8229

Date of Disbursement

/   /

Amount of Each Disbursement this Period

159.58

Full Name (Last, First, Middle Initial)

**B.** USW

Mailing Address 510 Main St

City  
Nitro

State  
WV

Zip Code  
25143

Purpose of Disbursement  
HQ Mortgage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.8259

Date of Disbursement

/   /

Amount of Each Disbursement this Period

810.29

Full Name (Last, First, Middle Initial)

**C.** Jeannette Wakim

Mailing Address 1 Hamilton Avenue

City  
Wheeling

State  
WV

Zip Code  
26003

Purpose of Disbursement  
In-kind - Basket Contents for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.8199

Date of Disbursement

/   /

Amount of Each Disbursement this Period

84.62

**SUBTOTAL** of Disbursements This Page (optional) .....

1054.49

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 29

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

Full Name (Last, First, Middle Initial)

**A.** Jeannette Wakim

Mailing Address 1 Hamilton Avenue

City  
Wheeling

State  
WV

Zip Code  
26003

Purpose of Disbursement  
In-kind - Basket Contents for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8201

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21.07

Full Name (Last, First, Middle Initial)

**B.** Jeannette Wakim

Mailing Address 1 Hamilton Avenue

City  
Wheeling

State  
WV

Zip Code  
26003

Purpose of Disbursement  
In-kind - Decorations for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8209

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.31

Full Name (Last, First, Middle Initial)

**C.** West Virginia Republican Party Inc.

Mailing Address P.O. Box 2711

City  
Charleston

State  
WV

Zip Code  
25330

Purpose of Disbursement  
Petty Cash for HQ

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.8234

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

151.38

**TOTAL** This Period (last page this line number only) .....

32545.23